links to local primary care facilities will enable many patients to remain in-state under the primary responsibility of physicians or dentists licensed in their home state. The development of telemedical links to specialty care centers can reduce the cost of transport and can lead to substantial reductions in the costs of patient care.

Developing metropolitan-wide systems of care for many cities also requires crossing one or two state boundaries. There are 25 major metropolitan areas in the United States that include more than one state. In each of these areas, state licensing requirements effectively limit the ability of physicians or dentists and other health care practitioners to serve the health care needs, via metropolitan wide telemedical systems, of the population base residing in their own communities. This limitation can lead to great disparities in access to health care due to the consumer's place of residence.

The widespread shortage of health professionals in many parts of rural America has long been recognized as a critical public policy issue. In many cases, access to health care could be greatly improved with the development of telemedical links with health facilities located in nearby states.

CONCLUSION

Statutes are being considered among the states which would require out-of-state physicians or dentists treating patients across state lines via telecommunications to possess licenses in the state "entered." Already in the vast majority of states the telemedicine practitioner would be considered to be practicing medicine upon a patient located there, thus providing the patient's state with jurisdiction over any malpractice action. Additionally, malpractice insurance coverage is generally predicated upon the physician being licensed where he practices. In other words, a physician sued for malpracticing via telemedicine in a state where he is not licensed might find himself without coverage, as well as responsible for his own defense costs. Failure to possess a state license would be used to establish negligence upon the part of the consulting physician. Criminal prosecution for practicing without a license could result, and the physician's home state could institute disciplinary action against him for his actions in the distant state. Telemedicine possesses incredible potential to increase healthcare accessibility, but is severely hampered by legal impediments of which licensure is one of the most obvious. Fortunately, licensure problems have the greatest potential to be alleviated by the passage of statutes aimed at addressing these issues.

Emerging from these careful considerations is the need to preserve the credentializing and monitoring efforts of each state while providing instant and immediate access to appropriate levels of care where not otherwise available. Such actions should allow for immediate response to instances of disease and trauma while securing for each state and its citizens the continuance of the credentializing and monitoring of quality within its boundaries with additional specialized back-up as needed.

FOOTNOTES

¹ ALA. CODE § 34-24-50 (1975).

² Geiger v. Jenkins, 316 F.Supp. 370 (N.D. Ga. 1970), aff'd, 401 U.S. 985, 91 S.Ct. 1236, 28 L.Ed. 2D 525 (1971). CONFERENCE REPORT ON HOUSE CONCURRENT RESOLUTION 67, CONCURRENT RESOLUTION ON THE BUDGET, FISCAL YEARS 1996–2002

SPEECH OF

HON. JAMES L. OBERSTAR

OF MINNESOTA

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 29, 1995

Mr. OBERSTAR. Mr. Speaker, I rise in opposition to the conference report on the budget resolution for fiscal year 1996 and to delineate for my colleagues the specific impacts this budget resolution is likely to have on the Federal Aviation Administration.

I say "is likely to have" because the conference report does not spell out the details of the cuts proposed for the FAA budget; but, given the general numbers and spending targets set down in the budget agreement we can calculate what the effects will be on specific FAA programs, such as the agency's new "zero accident" goal.

As ranking member of the House Aviation Subcommittee, I want all my House colleagues to understand the critical mission of the FAA. This Agency manages the world's largest air traffic control system, through which move half of all the 1 billion passengers who travel worldwide every year by air. They operate the Air Traffic Control system 24 hours a day, 365 days a year, handling, on average, two flights every second.

On an average day, FAA safety and security professionals will conduct nearly 1,000 inspections on pilots, planes and airports, ensuring that they remain airworthy and safe.

FAA maintains over 30,000 pieces of complex safety equipment and facilities across this Nation, operating at a reliability factor of 99.4 percent—a safety record envied by the rest of the world.

FAA issues more than 1,000 airport grants annually to improve airport safety and infrastructure.

FAA conducts 355,000 inspections annually to enforce safety standards and to issue certificates and licenses for aviation products and operators. FAA takes more than 12,000 enforcement actions each year.

The FAA has taken its share of cuts in the last 2 years as its contribution toward deficit reduction: FAA has cut 5,000 employees since 1993 for a current total of 48,000 employees. Of that number 36,000 have direct hands-on involvement in the ATC system, which includes 14 of the 15 busiest airports in the world.

In this era of deregulation, with extraordinary growth in both passengers and air traffic operations, we have seen a growth of 6 percent in air traffic during the last 2 years as the airlines have recovered from the serious economic decline and \$12 billion in losses of 1990–92. But while air traffic has jumped 6 percent these last 2 years, the FAA budget has suffered a real decline of 6 percent, which translates into a \$600 million cut.

This Budget Resolution Conference Agreement chops an additional \$10 billion from transportation spending, which if spread, as expected, to the FAA will jeopardize the safety and efficiency of the Nation's aviation system.

Under this budget resolution, FAA's ability to improve weather and safety equipment and prevent accidents would be compromised.

Introduction of Global Positioning Satellite navigation technology would be delayed at least 5 years, costing airlines millions of dollars a year in lost efficiency.

The ability of the aviation security system to maintain its vigilance against domestic and international terrorism would be cut by one-third.

FAA's obligation to certify new aircraft engines and parts would be greatly compromised and might even have to be contracted out to private interests which, in my judgment, clearly is not in the best interest of safety.

The weather services to general aviation and to commercial aviation provided through the Nation's Flight Service Stations would be greatly impaired as FSS and control towers would be closed, costing jobs and air traffic services to hundreds of communities in all 50 States, and delays to an estimated 105,000 flights annually at an estimated cost to carriers and passengers of more than \$2.3 billion.

I am just touching the tip of the iceberg on the impact of these cuts projected out over the next several years for the FAA as a result of this budget resolution.

The dedicated professionals of the FAA deserve better. They deserve our full support for full funding out of the Aviation Trust Fund to maintain our air traffic control system at its highest level of safety and efficiency.

FOREIGN OPERATIONS, EXPORT FINANCING, AND RELATED PRO-GRAMS APPROPRIATIONS ACT, 1996

SPEECH OF

HON. ROBERT A. UNDERWOOD

OF GUAM

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 28, 1995

Mr. UNDERWOOD, Mr. Speaker, I rise in full support of this amendment. This amendment is necessary not only because of the profits from drugs, but because of the children who buy them and sometimes die from them. We know that there is a big drug problem in the Asia-Pacific region. There is even a big drug problem on my island of Guam. This amendment sends a message that this country will not tolerate drugs. This amendment will show that this country will not sit down while a country we help will transform the money we give to them into drugs. This amendment will show that this country will take a strong stand on drugs. This amendment is just one small step to making a big problem disappear. We may need a marathon of steps to follow, but this represents a good beginning. This amendment will make the street safer for our children here and in the Asia-Pacific region. This is why we have to thank Mr. RICHARDSON and Mr. ROHRABACHER for combining to make this amendment.